## Asset Management Change Request for Michigan Geographic Framework

All boxes most be completed Date Observed: / / mo/day/yr Map Reference Number: \_\_\_\_\_ Contact Information Agency: Contact Name: Phone Number: ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_ Is the Observer the same person as the Contact person? If no: Observers Name: Agency: EMAIL: \_\_\_\_\_ Phone Number: ( ) **Location Information** Township/City/Village: County: Street Name: Cross Street 1: PR 1: PR 2: Cross Street 2: Who has jurisdiction of this road? What kind of Change? (Please Check One) Intersection Reconfiguration Road Addition Road Removal Road interruption: IF YES, what is the cause? Other, please explain (use back for more space): What year did this change occur? \_\_\_\_\_ Framework Observed

Make additional copies as needed Plea Revised Date: June 2, 2005 Ron

Please send completed forms and reference map to: CGI, Attn: Laura Blastic Romney Building - 10th floor, 111 S. Capitol Ave., Lansing, MI, 48913 (517) 373-7910